2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 25, 2004 8:00 am DOCUMENT # 727233 **Secretary of State** 1. Entity Name 02-25-2004 90052 011 ****61.25 HI GREENS OF INVERRARY, INC. Principal Place of Business Mailing, Address 5800 NW 44TH STREET 5800 NW 44TH STREET LAUDERHILL FL 33319 LAUDERHILL FL 33319 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-1554992 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GATSOS, ELAINE M ESQ Street Address (P.O. Box Number is Not Acceptable) 1499 W PALMETTO PARK RD #210 **BOCA RATON FL 33486** City Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent. SIGNATURE (NOTE: Registered Agent signature required when rejustating); Signature, typed or printed name of registered agent and title if applicable 9. Election Campaign Financing Trust Fund Contribution. FILE NOW: FEE IS \$61.25 \$5.00 May Be Make Check Pavable to Due By May 1, 2004 Added to Fees ... Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ☐ Delete TITLE TITLE ☐ Change ☐ Addition KLEIN, STANLEY NAME NAME 5900 NW 44TH ST STREET ADDRESS STREET ADDRESS LAUDERHILL FL 33319 CITY-ST-ZIE CITY-ST-7(P TITLE ☐ Delete TITLE ☐ Change ☐ Addition CORSI, MARSHA NAME NAME 5860 NW 44TH ST STREET ADDRESS STREET ADDRESS LAUDERHILL FL 33319 CITY-ST-ZIP CITY-ST-ZIP TD TITLE Delete TITLE TREASURER X Change ☐ Addition KATZ BERNARD NAME NAME. EMIL-WIS-NIEWSKI 5860 NW 4TH ST STREET ADDRESS STREET ADDRESS 5860 N.W. 44 H ST LAUDERHILL FL 33319 CITY-ST-ZIP CITY-ST-ZIP FL. LAUDERHILL Delete TITLE TITLE ☐ Change ☐ Addition ZURKOWSKI, ROBERT NAME NAME 5860 N.W. 44TH ST. STREET ADDRESS STREET ADDRESS FT. LAUDERDALE FL 33319 CITY-ST-ZIP CITY-ST-ZIP AST D TITLE X Delete □ Addition WISNIEW**S**KI**J**EMIL MARCIA DUN CAN NAME 5860 NW 447H ST 5900 N.W. 44 th ST STREET ADDRESS STREET ADDRESS LAUDERHILL FL 33319 CITY-ST-7IF CITY-ST-ZIP LAUDERHILL FL. 33319 TITLE ☐ Delete TITLE ☐ Addition ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

ROBERT ZURROWSKI

FILED

954-735-0525